

have been confirmed in follow-up studies.<sup>4-6</sup> The great appeal of occupational mortality studies is that occupational morbidity and mortality are theoretically preventable. The following are occupational mortality problems uncovered by this study: increased lung cancer in copper smelter workers,<sup>4</sup> increased pancreatic cancer and multiple myeloma in workers at a nuclear facility<sup>5</sup> and increased mortality due to emphysema, leukemia and lymphoma in aluminum reduction plant workers.<sup>6</sup>

The National Institute for Occupational Safety and Health (NIOSH) supported some of this work and is encouraging and supporting this activity in other states.

Especially important to the vital records studies is the information provided by the physicians, such as cause of death, complications of pregnancy and descriptions of congenital defects. We would therefore encourage physicians to be as specific and complete as possible in furnishing vital records information. It takes nearly

as long to write "multiple congenital defects" as to list the major defects seen.

Vital records will have an increasingly important role in the future as a source of information for chronic disease studies. These studies will be only as good as the information provided on vital records by the people who fill them out.

#### REFERENCES

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2. Milham S Jr, Elledge W: Maternal methimazole and congenital defects in children. *Teratology* 1972 Feb; 5:125-126
3. Milham S Jr: Occupational mortality in Washington State, 1950-1979. US Dept of Health, Education, and Welfare, National Institute for Occupational Safety and Health (in press)
4. Pinto SS, Henderson V, Enterline PE: Mortality experience of arsenic-exposed workers. *Arch Environ Health* 1978 Nov-Dec; 33(6):325-331
5. Gilbert ES, Marks S: An analysis of the mortality in workers in a nuclear facility. *Radiat Res* 1979 Jul; 79:122-148
6. Milham S Jr: Mortality in aluminum reduction plant workers. *JOM* 1979 Jul; 21:475-480

### Articles to Read in Other Journals

#### **Long-term Results of Prospective Randomised Study of Coronary Artery Bypass Surgery in Stable Angina Pectoris**

European Coronary Surgery Study Group

*Lancet*

II:1173-1180, Nov 27, 1982

DISCIPLINES: Family Practice, Internal Medicine, Cardiology, Cardiac Surgery

READABILITY: Average

*Results of a five-year plus follow-up of 768 men with coronary artery disease randomly assigned to receive a coronary artery bypass operation, or not, are reported by a European collaborative group. Criteria for surgical selection (such as three-vessel disease or stenosis of proximal third of the left anterior descending artery as part of two-vessel disease) or for medical regimens are evaluated.*

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